

CITY OF GREENSBORO AND NC A&T ALUMNI ASSOCIATION, INC. 2006 A&T HOMECOMING PAVILION VENDOR APPLICATION



PRINT LEGIBLY	TO AVOID DELAYS IN PR	ROCES	SING OR I	REJECTION	OF APPI	LICATION				
Name:										
Current address:										
City:			State:		ZIP Code:					
Phone:	Cell Phone:		E-mail:							
INFORMATION / REQUIREMENTS										
Food	Merchandise			Both						
Food vendors must submit a pre-approval form from the Guilford County Health Department with this application.										
Enter the dimensions of your THERE IS A 20' LIMIT FOR		TON	ACCOM							
Please provide a <u>detailed</u> description and/or pictures		cluding	j type (Ten	t, Trailer, Van	ı, etc.). <i>F</i>	Attach additional				
Electrical outlet required:	Yes or No (Circle one)	If Y	es, 110	or 220 v	/ (Circ	le one)				
Water connection required Food vendors receive first of Guilford County Health Dep	consideration for electrical a	and wa		Yes or No	(Circle	e one)				
Do you anticipate restockin	g during the hours the pav	ilion is	open?	Yes or No	(Circle	one)				
Do you intend to move any Pavilion following at the clodescribe:				Yes or No	(Circle	e one)				
Privilege License fee Space Fee	\$100. <u>100</u> .		то	TAL DUE	<u>\$</u> _	<u> 200.00</u>				
	APPLICATION CHEC	K LIS	Τ			INITIAL BELOW				
I have attached my non-re payable to "City of Greensh		ertified	, cashiers o	or bank check						
I understand my space assi Greensboro staff in the ord decisions of the City of Gre	ignment will be based on a er my application is receiv	ed.	further und	lerstand the	of					
By submitting this application included in the attached co and during the event.										
I have signed and attached										
I ATTEST THE INFORMATION	ON PROVIDED BY ME ON T	HIS A	PPLICATIO	N IS TRUE AN	ND ACCU	RATE.				
Signature of applicant:				Date:	/	/2006				

City of Greensboro Use Only										
Date Application Received:	, 2006	Selection Order:								
Number(s) Assigned:										
Parking Lot Assigned:			Α	В	С					
Notes:		<u>'</u>	•							